

**Hartford, Connecticut**

**Written Testimony of Campaign for Tobacco-Free Kids**

**In Support of HB 5020 and SB 244; Legislation to  
Ban the Sale of Flavored Vaping Products and Prohibit the Sales of all Tobacco  
Products in Health Care Facilities**

**Joint Committee on Public Health**

**March 6, 2020**



The Campaign for Tobacco-Free Kids submits these written comments in support of the proposed legislation to prohibit the sale of flavored electronic nicotine delivery systems and to prohibit the sales of all tobacco products (including e-cigarettes) in Connecticut. The Campaign for Tobacco-Free Kids is the nation's largest non-profit, non-governmental advocacy organization solely devoted to reducing tobacco use and its deadly toll by advocating for public policies that prevent kids from using tobacco, help smokers quit and protect everyone from secondhand smoke.

Make no mistake – the e-cigarette epidemic is an epidemic of historic proportions and its potentially devastating impact on Connecticut's youth is the direct result of deliberate decisions made by tobacco companies/e-cigarette companies to follow the same path tobacco companies have always followed - maximize sales and profits without regard to the consequences or the impact on our citizens and youth.

When e-cigarettes were introduced the e-cigarette industry claimed the target was adult smokers who could not quit. The reality has been entirely the opposite. E-cigarettes are now available in 15,000 flavors that have fueled use by our kids. They are sold in devices that deliver potent doses of nicotine in a manner that masks its risks and leads to rapid, intense addiction. They are packaged as sleek, high-tech devices that youth who would never consider smoking perceive as cool and risk free and that enable youth to use without being discovered by parents or teachers. And they are marketed on social media websites popular with youth using images identical to those used by the cigarette industry to attract generations of kids.

In 2018, youth e-cigarette use in the United States had skyrocketed to what the U.S. Surgeon General and the U.S. Food and Drug Administration (FDA) called "epidemic" levels. Throughout the fall of 2019, data was released from two national surveys affirming what parents, health practitioners and public officials have feared—the youth e-cigarette epidemic is only getting worse. In September 2019, the preliminary results from the 2019 National Youth Tobacco Survey and the 2019 Monitoring the Future survey were released and this was followed with the release of the full data set in November and December 2019.

The new data released by the federal government demonstrates that the number of youth who are using e-cigarettes and becoming seriously addicted has grown exponentially and continues to grow, and that the evidence of harm to our youth is significantly greater than previously realized because of the rapidity and intensity with which so many youth are becoming addicted. These new data on the skyrocketing rate of youth e-cigarette use heighten the urgency of taking immediate action. Governor Ned Lamont was right to propose legislation in the Public

Health Implementer bill (HB 5020) to prevent e-cigarettes from reversing the historic progress Connecticut has made in reducing youth tobacco use, and the legislature should not delay passage of this important policy.

The data has already led to new action by local and state governments seeking to prevent the youth e-cigarette epidemic from reversing decades of progress. Since September 25, 2019, San Francisco has rejected an effort funded by Juul to reverse its ban on flavored e-cigarettes; Boston and New York City have enacted permanent bans on the sale of flavored e-cigarettes; New Jersey issued a Task Force Report calling for a statewide ban on the sale of flavored e-cigarettes, and in January the New Jersey legislature prohibited the sale of all flavored e-cigarettes; courts in Montana and Washington have upheld emergency orders issued by those states, and in November, Massachusetts enacted statewide legislation making permanent the ban on the sale of these products.

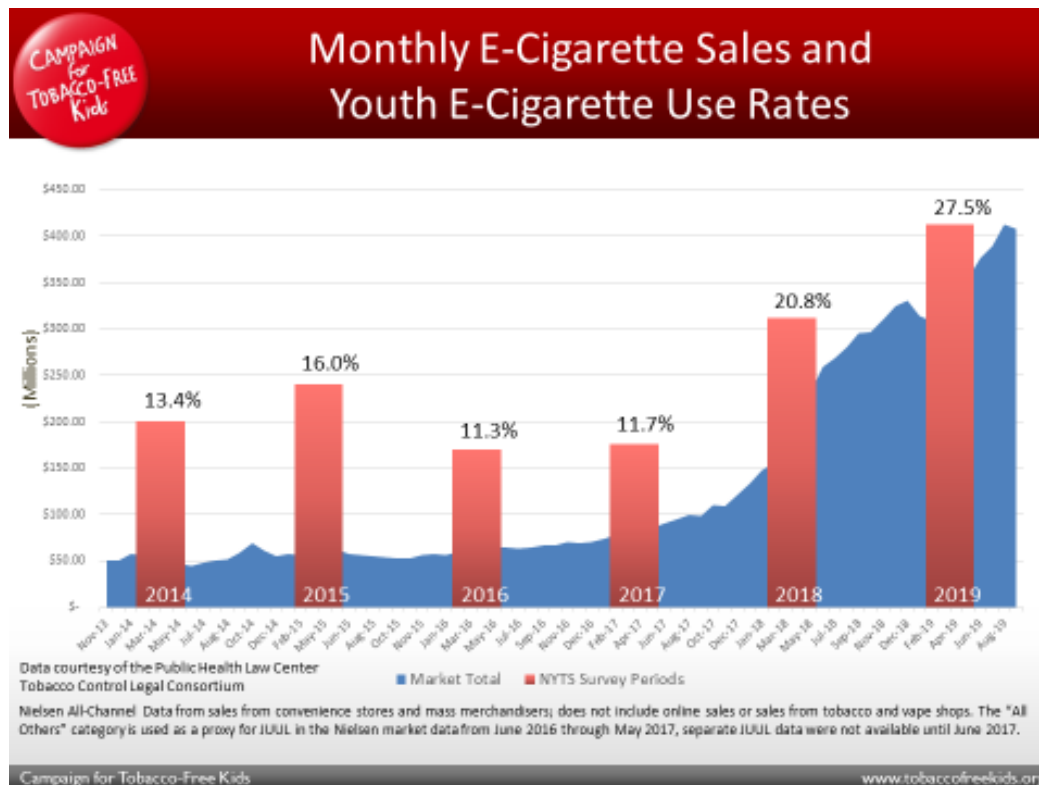
### **E-cigarette Use by Youth is Skyrocketing**

We are at a critical juncture in our nation's public health history. After making tremendous progress in reducing youth tobacco use over the past several decades, e-cigarettes, and Juul in particular, are undermining the declines in overall youth tobacco use. Youth e-cigarette use in the United States has skyrocketed to what the U.S. Surgeon General and the FDA have called "epidemic" levels.<sup>1</sup> It is a public health crisis and *it is getting worse*.

The escalation of youth e-cigarette use is truly unprecedented. Researchers at the University of Michigan who conduct the Monitoring the Future Study found that the increase in youth vaping of nicotine from 2017 to 2018 was the single largest one year increase in youth use of *any substance* in the survey's 43-year history.<sup>2</sup> Data released in the *New England Journal of Medicine* in September 2019 (and followed up with a more complete release in December 2019), show that this historic increase was followed by another increase in 2019. From 2017 to 2019, youth nicotine vaping more than doubled among 8<sup>th</sup>, 10<sup>th</sup> and 12<sup>th</sup> graders. Now, 9% of eighth graders, 20% of 10<sup>th</sup> graders and 25% of 12<sup>th</sup> graders are current vapers.<sup>3</sup>

Newly released data from the 2019 National Youth Tobacco Survey (NYTS) also showed that e-cigarette use among high school students more than doubled from 2017 to 2019, from 11.7 percent to 27.5 percent of students, or more than one in four high schoolers. Youth are starting to use e-cigarettes at younger and younger ages. Among middle school students, e-cigarette use more than tripled from 2017 to 2019, increasing from 3.3% to 10.5%. Altogether, over 5.3 million middle and high school students used e-cigarettes in 2019 – an increase of over three million users in just two years.<sup>4</sup> The NYTS results published in November were followed by the

release of the University of Michigan Monitoring the Future study that was also released in two segments – a preliminary release in September with the full release in December 2019 - and it showed the same disturbing trend line.



Nationally, the rise in e-cigarette use has driven an increase in the use of any tobacco product among youth. In 2019, 31.2% of high school students and 12.5% of middle school students – 6.2 million kids altogether – were current (past-month) users of some type of tobacco product in 2019. This is the highest tobacco use rate reported by the NYTS in 19 years.<sup>5</sup> There is no doubt that e-cigarettes are reversing decades of progress that Connecticut has made in reducing youth tobacco use and are addicting a new generation of kids.

### Flavored E-Cigarettes Have Fueled the Popularity of These Products Among Kids

The evidence is clear that flavored e-cigarettes, like mint, mango and gummy bear, have fueled this epidemic. In recent years, there has been an explosion of sweet-flavored e-cigarettes. As of 2017, there were more than 15,500 unique e-cigarette flavors available online, including many kid-friendly flavors like gummy bear, cotton candy, and peanut butter cup.<sup>6</sup> Research shows that flavored products are not only popular among youth, but play a role in initiation and uptake of tobacco products. As the recent Surgeon General Report on Smoking Cessation succinctly stated, “the role of flavors in promoting initiation of tobacco product use among youth is well established.”<sup>7</sup> The 2016 Surgeon General Report on e-cigarettes concluded that

flavors are among the most commonly cited reasons for using e-cigarettes among youth and young adults.<sup>8</sup>

- Data from the 2016-2017 wave of the government’s Population Assessment for Tobacco and Health (PATH) study found that 70.3% of current youth e-cigarette users say they use e-cigarettes “because they come in flavors I like.”<sup>9</sup>
- The PATH study also found that found that 97% of current youth e-cigarette users had used a flavored e-cigarette in the past month.<sup>10</sup>
- 57.3% of high school e-cigarette users use mint or menthol flavors, an increase from 38.1% in 2018.<sup>11</sup> Among 10<sup>th</sup> and 12<sup>th</sup> grade Juul users, mint is the most popular flavor.<sup>12</sup>

If anything, these official government figures under report the percentage of youth who use flavored e-cigarettes. Talk to any teacher, school principal or high school student and they will tell you that virtually every kid who uses an e-cigarette, uses a flavored e-cigarette. It is the reason that banning flavored e-cigarettes is an essential step in reversing the youth e-cigarette epidemic. Anything less will fail.



E-cigarettes didn’t become popular with kids by accident. E-cigarette makers have introduced products with thousands of flavors that appeal to young people and engaged in the kind of marketing that mirrors what the cigarette industry did for decades. The 2016 Surgeon General Report on e-cigarettes concluded that, **“E-cigarettes are marketed by promoting flavors and using a wide variety of media channels and approaches that have been used in the past for marketing conventional tobacco products to youth and young adults.”**<sup>13</sup>

The use of flavors in e-cigarette products is of even greater concern because e-cigarettes are the subject of extensive advertising campaigns, and there is evidence that young people are exposed to significant amounts of e-cigarette advertising. By mimicking the tobacco industry’s strategies, including celebrity endorsements, slick TV and magazine advertisements, and sports and music sponsorships, e-cigarette advertising has effectively reached youth and young adults.

The 2019 NYTS found that 7 out of 10 middle and high school students—18.3 million youth—report being exposed to e-cigarette advertisements.<sup>14</sup>

When Juul was first launched in 2015, the company used colorful, eye-catching designs and youth-oriented imagery and themes, such as young people dancing and using Juul. Juul’s original marketing campaign included billboards, YouTube videos, advertising in Vice Magazine, launch parties and a sampling tour. A report by Stanford University researchers concluded that Juul’s launch marketing was “patently youth oriented” and closely resembled the themes and tactics used by the tobacco industry for decades.<sup>15</sup> Posts on social media platforms like Twitter and Instagram also fueled Juul’s popularity among youth.<sup>16</sup> Social media promotion included influencers – social media stars with large numbers of online followers who were paid to recommend Juul and post photos with the product. These influencers created tremendous interest and enthusiasm for the product. E-cigarette companies market extensively on product websites and maintain a strong presence on social media sites popular among youth, like Facebook, YouTube, Instagram, and Twitter.<sup>17</sup> E-cigarette manufacturers have also placed ads on search engines and websites that focus on music, entertainment, and sports and which often have substantial youth and young adult audiences.<sup>18</sup>

Juul claims that it has “voluntarily” stopped marketing on social media, but Juul made that announcement only after it faced severe public criticism. There is nothing to prevent Juul from reversing its public position about where and how it will market its products as soon as public scrutiny fades. Indeed, in other countries Juul has continued to engage in the type of marketing and advertising that fueled the US youth e-cigarette epidemic so that its decision in the US should be seen as nothing more than a temporary effort to deflect public scrutiny and certainly not a corporate commitment to stop marketing to kids. Government action is the only way to protect our kids.

### **Youth E-cigarette Users Struggle with Nicotine Addiction**

The number of youth now using e-cigarettes is alarming and the evidence is growing that e-cigarettes increases the susceptibility to long term addiction. New data make it clear that youth who are using e-cigarettes are not just experimenting, but are becoming addicted at levels that have not been seen among kids who use cigarettes in decades.

- Among those who had used e-cigarettes in the past 30 days, 34.2% of high schoolers and 18% of middle schoolers were frequent users of e-cigarettes, using e-cigarettes on at least 20 of the preceding 30 days.<sup>19</sup>

- 21.4% of high school e-cigarette users and 8.8% of middle school e-cigarette users were daily users, a strong indication of addiction.
- Thus, 1.6 million middle and high school students were frequent users of e-cigarettes, including nearly 1 million (970,000) daily users.<sup>20</sup>
- Alarming, one in nine high school seniors (11.6%) report vaping nicotine on a near daily basis.<sup>21</sup>

These statistics are confirmed by the actual experience of parents and pediatricians across the country. E-cigarette use, especially Juul, has permeated schools and the daily life of hundreds of thousands of youth. It is clear that large numbers of teen e-cigarette users are struggling with nicotine addiction and withdrawal. The New York Times profiled Matt Murphy from Reading, MA who had his first Juul when he was 17. He described the euphoric head rush of nicotine as “love at first puff”. He quickly became addicted to Juul’s intense nicotine hits. He became so dependent on Juul that he nicknamed the device his “11th finger.”<sup>22</sup> He is not alone. The problem is so bad that FDA convened a public hearing to gather input on how to help youth addicted to the nicotine in e-cigarettes. No one is quite sure how to help these youth quit. There is no question, though, that banning flavored e-cigarettes will help prevent kids from ever getting hooked.

### **Nicotine Use Has Serious Health Consequences for Youth**

Though there is insufficient research on the long-term effects of using e-cigarettes in general, there is a growing body of evidence of immediate harms, many of which are caused by the intense addiction caused by the high levels of nicotine these products deliver. Nicotine is a highly addictive drug and young people are especially vulnerable to nicotine addiction. Nicotine can have lasting damaging effects on adolescent brain development, because brain development continues until about age 25. According to the Surgeon General, “because the adolescent brain is still developing, nicotine use during this critical period can disrupt the formation of brain circuits that control attention, learning, and susceptibility to addiction.”<sup>23</sup> Nicotine can also prime the brain for addiction to other drugs.<sup>24</sup> Because of these risks, the Surgeon General found that, “The use of products containing nicotine in any form among youth, including in e-cigarettes, is unsafe.”<sup>25</sup>

The observable immediate harms from e-cigarette use have increased since the introduction of Juul and Juul-like products. Since the introduction of Juul, youth are now using products that effectively deliver very large doses of nicotine. Juul pioneered a new e-liquid formulation that delivers nicotine more effectively and with less irritation than earlier e-cigarette models. According to the company, the nicotine in Juul is made from “nicotine salts found in leaf

tobacco, rather than free-base nicotine,” in order to “accommodate cigarette-like strength nicotine levels.”<sup>26</sup> A 2018 Surgeon General advisory on e-cigarette use among youth warned that nicotine salts allow users to inhale high levels of nicotine more easily and with less irritation than e-cigarettes that use free-base nicotine. As a result, it is easier for young people to initiate the use of nicotine with these products.<sup>27</sup> A single Juul pod can deliver as much nicotine as a pack of cigarettes.<sup>28</sup> One study estimated that youth could meet the threshold for nicotine addiction by consuming just one quarter of a Juul pod per day.<sup>29</sup> And yet, research has also found that many young Juul users often do not know these products contain any nicotine at all.<sup>30</sup>

Juul’s competitors, seeking to emulate the company’s success, have since flooded the U.S. market with similar pod-based e-cigarettes, including some that have nicotine levels even higher than Juul’s, resulting in what some researchers have referred to as a “nicotine arms race.” Many of these companies offer the devices and pods that are cheaper than Juul and in a wider variety of kid-friendly flavors.<sup>31</sup> New NYTS data released in November 2019 show that Juul is overwhelmingly the most popular e-cigarette among youth (preferred by 59% of high school e-cigarette users), but other products like Suorin and Smok, are becoming popular as well.<sup>32</sup>

### **Youth E-Cigarette Users Are at Increased Risk of Smoking Cigarettes**

E-cigarettes are addicting a new generation of kids and threaten to reverse decades of progress in reducing youth tobacco use. Alarmingly, evidence also continues to build that for young people, using e-cigarettes increases the likelihood of smoking cigarettes.

- In 2016, the Surgeon General concluded that while more research is needed, evidence from several longitudinal studies suggests that e-cigarette use is “strongly associated” with the use of other tobacco products among youth and young adults, including conventional cigarettes.<sup>33</sup>
- Last year, the National Academies of Science, Engineering & Medicine (NASEM) released a comprehensive report which found that there was substantial evidence that e-cigarette use increases risk of ever using cigarettes among youth and young adults. The NASEM report also concluded, “There is moderate evidence that e-cigarette use increases the frequency of subsequent combustible tobacco cigarette use” among youth and young adults.<sup>34</sup>
- An analysis of data from the FDA’s nationally representative Population Assessment of Tobacco and Health (PATH) study found that from 2013 to 2016, youth (ages 12-15) e-cigarette use was associated with more than four times the odds of trying cigarettes and



nearly three times the odds of current cigarette use. The researchers estimate that this translates to over 43,000 current youth cigarette smokers who might not have become smokers without e-cigarettes.<sup>35</sup>

Multiple studies have also demonstrated that many youth who use e-cigarettes are kids who are among those least at risk of cigarette smoking. For these kids, e-cigarettes are not replacing cigarettes, they are turning non-tobacco users into tobacco users.<sup>36</sup>

### **E-Cigarettes Can Expose Users to Harmful Chemicals**

E-cigarettes can also expose users to other harmful chemicals. Studies have found that e-cigarettes can contain harmful and potentially harmful chemicals, including formaldehyde, acrolein, volatile organic compounds, and metals like nickel and lead.<sup>37</sup> More research is needed about the chemicals found in e-cigarettes and the impact of inhaling these chemicals deeply into the lungs.<sup>38</sup>

Flavored e-cigarettes may pose unique harms. According to the Surgeon General, “while some of the flavorings used in e-cigarettes are generally recognized as safe for ingestion as food, the health effects of their inhalation are generally unknown” and noted that some of the flavorings found in e-cigarettes have been shown to cause serious lung disease when inhaled.<sup>39</sup> An article in the *Journal of the American Medical Association* raised concerns that the chemical flavorings found in some e-cigarettes and e-liquids could cause respiratory damage when the e-cigarette aerosol is inhaled deeply into the lungs.<sup>40</sup> According to the FDA, “Flavorings that are safe for use in food may become toxic when these chemicals are heated and inhaled. Some have been shown to be harmful to the lungs.”<sup>41</sup>

In *Nicopure Labs LLC v. FDA*, a federal appellate court recently recognized that “[e]-cigarettes are indisputably highly addictive and pose health risks, especially to youth, that are not well understood.”<sup>42</sup> Furthermore, the court noted that “[e]-cigarette liquids and vapor contain chemicals in addition to nicotine that pose known risks. The aerosol emitted from e-cigarettes is not simply water vapor; rather e-cigarette aerosols have been found to contain at least carbonyls, tobacco specific nitrosamines, heavy metals, and volatile organic compounds. E-liquids may contain formaldehyde, diacetyl, acetyl propionyl and various aldehydes. Aldehydes, ‘a class of chemicals that can cause respiratory irritation’ and ‘airway constriction,’ appear in many flavored e-cigarettes, including cotton candy and bubble gum. One study found that the flavors ‘dark chocolate’ and ‘wild cherry’ exposed e-cigarette users to more than twice the recommended workplace safety limit for two different aldehydes. Like secondary smoke inhalation from conventional cigarettes, exhaled aerosol from e-cigarettes may include nicotine and other toxicants that can pose risks for non-users.”<sup>43</sup>

Despite the known and unknown risks of e-cigarettes, the FDA has not reviewed or authorized a single e-cigarette product that is on the market today.<sup>44</sup> Thus, users and non-users of e-cigarettes continue to be exposed to harmful chemicals in e-cigarettes, with risks that are not yet fully understood.

### **Long-term Health Effects of E-Cigarettes are Unknown**

Little is known about the long-term effects of e-cigarette use. There are literally thousands of e-cigarette devices and liquids on the market without any FDA review of what they are delivering into people's bodies and their long-term health risks.

- E-cigarettes have been found to increase heart rate and blood pressure, and initial research indicates that the aerosol can damage DNA and the respiratory system. But because the products are relatively new, there is not enough information to assess the long-term impact on cancer, respiratory disease, and heart disease risk.<sup>45</sup>
- In a 2019 review of the evidence on the effects of e-cigarettes on respiratory health, researchers found that, "Studies show measurable adverse biologic effects on organ and cellular health in humans, in animals, and in vitro." The researchers also noted that, "The effects of e-cigarettes have similarities to and important differences from those of cigarettes. Decades of chronic smoking are needed for development of lung diseases such as lung cancer or chronic obstructive pulmonary disease, so the population effects of e-cigarette use may not be apparent until the middle of this century. We conclude that current knowledge of these effects is insufficient to determine whether the respiratory health effects of e-cigarette are less than those of combustible tobacco products."<sup>46</sup>

### **The Claim that E-Cigarettes are 95% Safer than Cigarettes is Erroneous and is Widely Disputed by Researchers**

Claims that e-cigarettes are 95% safer than cigarettes, popularized by an estimate in a 2015 Public Health England (PHE) report are unfounded. Significantly, not a single U.S. health authority or government agency has supported this claim. In fact, the claim is widely disputed by U.S. government agencies and medical associations.

- The FDA has noted that the panelists conducting the underlying harm analysis "were selected without any formal criterion," that there was a "lack of hard evidence" supporting most of the harm analysis, and that the methodology for arriving at the relative harm assessments underlying the "95% safer" conclusion was "unclear."<sup>47</sup>
- A recent article concluded, "The '95% safer' estimate is a 'factoid': unreliable information repeated so often that it becomes accepted as fact." This article also notes "the evidence-lacking estimate derived in 2013 cannot be valid today and should not be relied upon further." Since 2013, a substantial amount of new evidence has emerged

about e-cigarettes. The article notes that the devices are now more powerful, create more aerosol, and expose users to more toxicants. The proliferation of e-liquids with nicotine salts allow users to inhale significantly higher levels of nicotine. More research emerged about the toxicants in e-cigarettes, and their potential respiratory and cardiovascular effects.<sup>48</sup>

- An editorial in *The Lancet* concluded that, “the opinions of a small group of individuals with no pre-specified expertise in tobacco control were based on an almost total absence of evidence of harm. It is on this extraordinarily flimsy foundation that PHE based the major conclusion and message of its report.”<sup>49</sup>

Studies continue to raise new concerns about e-cigarettes and the evidence is insufficient to reach definitive conclusions regarding their relative health risk compared to cigarettes. The 2018 NASEM Report found that a great deal of scientific uncertainty still exists regarding the relative safety of e-cigarettes and that, “the absolute risks of the products [e-cigarettes] cannot be unambiguously determined at this time. Long-term health effects, of particular concern for youth who become dependent on them, are not yet clear.”<sup>50</sup>

### **E-Cigarettes Have Not Been Proven to Help Smokers Quit**

No major scientific body in the United States has concluded that e-cigarettes are an effective tobacco cessation device. Leading public health authorities in the U.S. have found that there is not enough evidence to recommend e-cigarettes for tobacco cessation, and no e-cigarette has received approval from the FDA to be sold as a tobacco cessation product. The 2020 Surgeon General Report on Smoking Cessation, released just this week, concluded that “there is presently inadequate evidence to conclude that e-cigarettes, in general, increase smoking cessation.” The Surgeon General also cautions that because e-cigarettes are not a single product, but “a continually changing and heterogeneous group of products” that “are used in a variety of ways,” it is difficult to make broad generalizations about the efficacy of e-cigarettes for smoking cessation based upon any one study or any one product.<sup>51</sup>

Moreover, there is no evidence that flavors in e-cigarettes play any role in smoking cessation. While there are surveys showing that many adults enjoy using flavored products, and anecdotal reports of smokers who says flavored e-cigarettes helped them quit, there is no evidence that smokers could not quit without non-tobacco flavors. There has not been a single randomized controlled trial to assess the impact of flavored vs. non-flavored or tobacco-flavored e-cigarettes on smoking cessation outcomes.

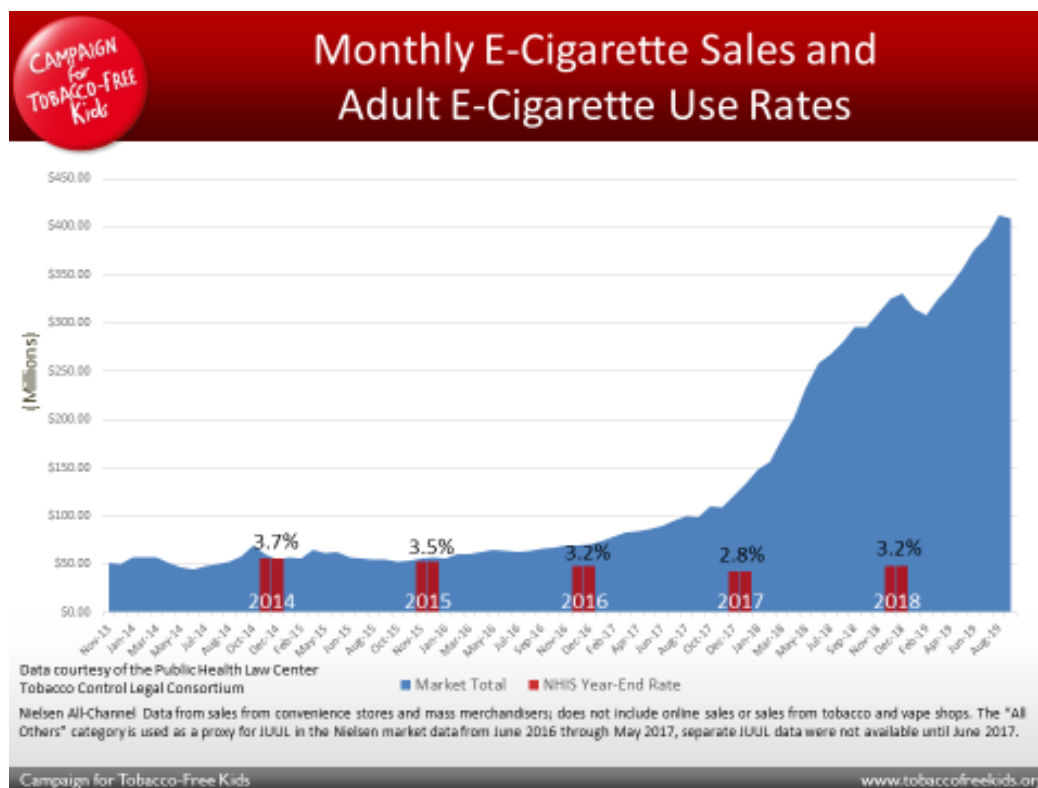
### **Conclusions from Public Health Authorities:**

- The U.S. Preventive Services Task Force, which makes recommendations about the effectiveness of specific preventive care services after a thorough assessment of the science, concluded that “the current evidence is insufficient to recommend electronic nicotine delivery systems for tobacco cessation....”<sup>52</sup>

- A 2018 report from the National Academies of Sciences, Engineering, and Medicine (NASEM) concluded, “[o]verall, there is limited evidence that e-cigarettes may be effective aids to promote smoking cessation.”<sup>53</sup>
- Researchers from the CDC stated, “There is currently no conclusive scientific evidence that e-cigarettes promote long-term cessation, and e-cigarettes are not included as a recommended smoking cessation method by the U.S. Public Health Service.”<sup>54</sup>
- FDA is the federal agency charged with determining what products are effective at helping smokers quit. FDA reached the same conclusion and stated, “[T]here is not sufficient evidence to conclude that youth and young adults are using [e-cigarettes] as a means to quit smoking.”<sup>55</sup> According to the FDA, “systematic reviews found insufficient evidence to conclude that e-cigarettes aid smoking cessation.”<sup>56</sup> In reaching this conclusion, the FDA recognized that several studies have found that cigarette smokers who also used e-cigarettes had statistically significantly worse quit rates than those cigarette smokers who did not use e-cigarettes.<sup>57</sup> In a recent court brief, the FDA stated that, “the claim that vaping helps smokers quit in meaningful numbers remains unproven.”<sup>58</sup>
- In *Nicopure v. FDA*, the court noted that “[E-cigarettes] provide a trendy on-ramp to tobacco use for people who otherwise might have never used it. Accordingly, while e-cigarettes have been touted as less risky than combustible cigarettes, those claims remain unproved. Meanwhile, e-cigarettes clearly have the potential to increase tobacco use and net health costs for the public as a whole.”<sup>59</sup>

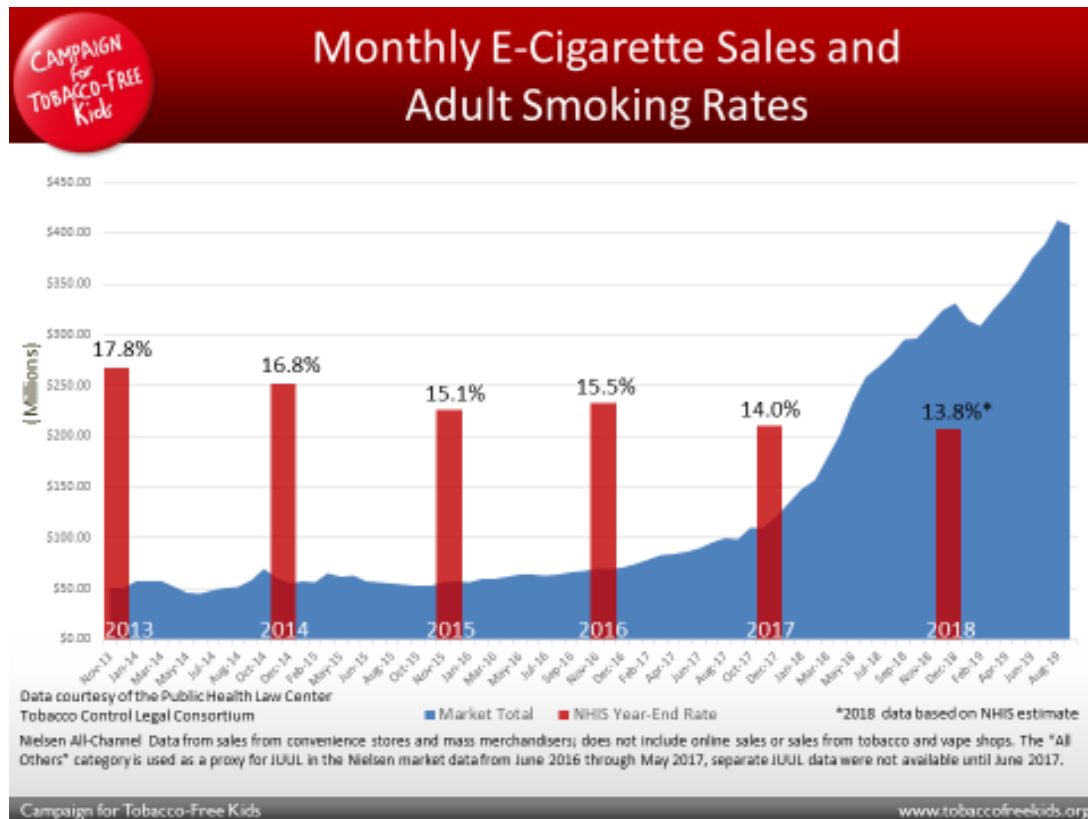
Additionally, several studies have found that e-cigarette use is not associated with successful quitting.<sup>60</sup> A 2018 study did not find any evidence that ENDS help adult smokers quit at a higher rate than smokers who did not use these products despite ENDS users being more likely to make a quit attempt. In fact, the authors state that “findings indicate that, at the time of this study, ENDS under “real world” use and conditions may have suppressed or delayed quitting among some adult smokers.” Specifically, of the 27 percent of smokers who reported using ENDS at baseline, about 90 percent were still smoking at one-year follow-up. Moreover, the study found that ENDS users quit at a lower rate than non-ENDS users regardless of frequency or duration of ENDS use, device type, quitting as reason for use, or e-liquid flavor.<sup>61</sup> A meta-analysis of 38 studies that examined the association between e-cigarette use and smoking cessation among adult smokers found that the odds of quitting were less among smokers using e-cigarettes.<sup>62</sup> A systematic review that examined consumer preference for various e-cigarette attributes found “inconclusive evidence” as to whether flavored e-cigarettes assisted quitting smoking.”<sup>63</sup>

E-cigarette companies may claim that adult smokers are their target audience, but that is not who is using the product. E-cigarettes have become increasingly popular among youth and young adults, while there has been no significant uptake among older adults. In 2018, 3.2% of adults used e-cigarettes, compared to 2.8% in 2017, 3.2% in 2016 and 3.5% in 2015 – adult e-cigarette use has remained essentially flat at about 3% over the past several years.<sup>64</sup> When it comes to adults, rather than quitting, data show that the more common use pattern for adult e-cigarette users is to use both e-cigarettes and cigarettes.<sup>65</sup> The currently available data show that about half (49.6%) of adult e-cigarette users are also current cigarette smokers (dual users).<sup>66</sup>



Little data are available to show what happens with dual users over time. Analysis of FDA’s Population Assessment of Tobacco and Health (PATH) data found that nearly 9 out of 10 early dual users were still smoking cigarettes at follow-up. Among adults who were dual users of e-cigarettes and cigarettes at Wave 1 (2013-2014), 44.3 percent maintained dual use, 43.5 percent discontinued e-cigarette use but maintained cigarette smoking, and only 12.1 discontinued cigarette use (5.1% discontinued cigarette use but continued e-cigarette use and 7.0% discontinued use of both products) at Wave 2 (2014-2015).<sup>67</sup> CDC has highlighted the importance of quitting cigarettes completely, not just cutting down. According to the CDC, “If you only cut down the number of cigarettes you smoke by adding another tobacco product, like

e-cigarettes, you still face serious health risks. Smokers must quit smoking completely to fully protect their health – even a few cigarettes a day are dangerous.”<sup>68</sup> A study using 2013-2014 PATH data found that dual users had toxicant exposures that were similar to those who only used cigarettes.<sup>69</sup>



### Limiting Sale of Flavored E-Cigarettes to Adult-Only Retailers Will Not Protect Kids

Limiting sales of flavored tobacco products to certain types of stores is insufficient. There is no evidence that “adult-only tobacco retailers” are more effective at preventing sales to minors. According to the 2018 National Youth Tobacco Survey (NYTS), more youth report buying e-cigarettes at a vape shop compared to a gas station or convenience store - 16.5% of middle and high school e-cigarette users under 18 report obtaining e-cigarettes from a vape shop in the past month and 9.8% from a gas station or convenience store.<sup>70</sup> The FDA even noted in its draft policy on flavored e-cigarettes that more youth report buying e-cigarettes from vape shops than convenience stores.<sup>71</sup> A study in *JAMA Pediatrics* found that in California, e-cigarette sales to minors violations are significantly higher in tobacco and vape shops than any other type of retailer, with 44.7% selling to underage buyers.<sup>72</sup>

## **FDA Has Failed To Use Its Regulatory Authority Over E-Cigarettes to Protect Kids**

Although Congress gave FDA broad regulatory authority over tobacco products in the Family Smoking Prevention and Tobacco Control Act of 2009 (Tobacco Control Act), the agency has largely failed to use that authority to regulate e-cigarettes.<sup>73</sup> Despite the requirement in the Tobacco Control Act that new tobacco products (i.e. those introduced after February 15, 2007) obtain an FDA order authorizing their marketing,<sup>74</sup> not a single e-cigarette product currently on the market has been reviewed and authorized by the FDA. Thus, it is essential for Connecticut and other states to utilize their authority to protect the health of its residents and especially its youth. Moreover, the Tobacco Control Act expressly preserves the power of states to regulate, and even prohibit, the sale of tobacco products.<sup>75</sup>

E-cigarettes were entirely unregulated by FDA until the 2016 issuance of a final rule “deeming” e-cigarettes and other previously unregulated tobacco products subject to FDA regulation.<sup>76</sup> Even after the Deeming Rule was issued, FDA’s regulatory power has been severely underutilized. For example, although FDA now has the authority to regulate the methods used in manufacturing, design and testing of vapor products and to mandate new product standards regarding the construction, composition, ingredients and characteristics of vapor products,<sup>77</sup> the agency has issued no regulations requiring good manufacturing practices for e-cigarettes, nor has it issued a single product standard for e-cigarettes. In addition, although e-cigarette manufacturers are under an obligation to provide FDA all documents in their possession relating to the “health, toxicological, behavioral, or physiologic effects” of their products,<sup>78</sup> FDA is enforcing that mandate only as to documents generated by companies before December 31, 2009.<sup>79</sup> This means that virtually no such health documents have been provided for e-cigarettes, most of which were not even on the market until after 2009.

Most significantly as to e-cigarettes, FDA has failed to implement the required premarket review of “new tobacco products” (i.e. products marketed after February 15, 2007), in which manufacturers generally would be required to demonstrate that their products are “appropriate for the protection of public health” in order to stay on the market or enter the market.<sup>80</sup> At the time it issued the Deeming Rule in August 2016, FDA exercised its enforcement discretion to e-cigarettes already on the market, to give their manufacturers a two-year period, until August 2018, to file applications for premarket review.<sup>81</sup> Then, in an August 2017 Guidance, FDA announced it would further defer enforcement of the premarket review requirements for e-cigarettes four additional years until 2022. Thus, FDA allowed thousands of flavored e-cigarettes to remain on the market until 2022 without having to even submit an application demonstrating that they met the public health standard in the statute. As the result of a lawsuit brought against FDA by several public health groups, a federal court established a ten-month deadline (until May 2020) for industry marketing applications and a one-year deadline for completion of FDA review. Thus, the premarket review process has been revived, but only by court order.<sup>82</sup> That court order currently is on appeal.

FDA's enforcement policy announced on January 2, 2020 is also wholly inadequate to address the youth vaping epidemic.<sup>83</sup> The policy exempts only restricts flavors in some cartridge-based e-cigarettes, leaving flavored e-liquids in every imaginable flavor widely available. The policy also exempts all menthol flavored e-cigarettes. Leaving menthol e-cigarettes on the market will not solve the youth e-cigarette epidemic as menthol tobacco products are uniquely appealing to youth. Half (50.1%) of youth who have ever tried smoking initiated with menthol flavored cigarettes<sup>84</sup> and over half (54%) of current youth smokers ages 12-17 smoke menthol cigarettes.<sup>85</sup> There is no reason to believe that menthol e-cigarettes are not equally appealing to kids—especially if they are the only available flavor for cartridge-based products. Data from the 2019 National Youth Tobacco Survey show that over half (57.3%) of high school e-cigarette users use mint or menthol flavored e-cigarettes. This is an increase from just 16% in 2016.<sup>86</sup> Furthermore, the policy also exempts refillable pod systems like Suorin and Smok and disposable e-cigarettes like Puff Bar, Mojo, and Stig, all which are immensely popular among youth. Because FDA's policy falls far short of clearing the market of flavored e-cigarettes, they and other flavored e-cigarettes will remain widely available to youth. More information on this plan is provided in the Appendix.

### **Addressing Youth Tobacco Addiction and Tobacco-related Health Disparities by Banning the Sale of All Flavored Tobacco Products, In Addition to E-Cigarettes**

While the epidemic of youth e-cigarette use threatens to undue all the progress we've made in Connecticut reducing tobacco use and must be addressed immediately, there are other flavored tobacco products that are marketed just as insidiously to youth and minority populations, the result of which has been a tremendous loss of life over the last 50 years. The sale of these products should be eliminated as well, and we urge this committee to do so by considering HB 76, an Act Prohibiting the Sale of Flavored Cigarettes, Tobacco Products, Electronic Nicotine Delivery Systems and Vapor Products.

Cigarettes with specific characterizing flavors were prohibited in the U.S. on September 22, 2009, as part of the Family Smoking Prevention and Tobacco Control Act (TCA) that gave the U.S. Food and Drug Administration (FDA) authority over tobacco products.<sup>87</sup> This provision excluded menthol cigarettes, which have subsequently increased their share of the cigarette market. Sales of menthol cigarettes increased from 2011 to 2015, at a time when overall cigarette sales have been gradually decreasing.<sup>88</sup> Data from the Federal Trade Commission (FTC) show that in 2018, menthol cigarettes comprised 36 percent of the market, the highest proportion on record since FTC began collecting this data in 1963.<sup>89</sup>



Menthol cigarettes pose a tremendous public health threat. A 2013 FDA report on the health impact of menthol cigarettes determined that menthol cigarettes lead to increased smoking initiation among youth and young adults, greater addiction and decreased success in quitting smoking.<sup>90</sup> Further, FDA's Tobacco Products Scientific Advisory Committee's (TPSAC)<sup>a</sup> concluded, **"Removal of menthol cigarettes from the marketplace would benefit public health in the United States."**<sup>91</sup> Ontario, Canada banned menthol cigarettes as of January 1, 2017 and initial evaluation results suggest that the law led to increased quit attempts and smoking cessation among adult menthol smokers.<sup>92</sup> The Canadian government subsequently banned menthol cigarettes nationwide in October 2017.

### **Menthol Makes it Easier for Youth to Initiate Tobacco Use**

The tobacco companies know that almost all new tobacco users begin their addiction as kids, but they also know that to novice smokers, tobacco can be harsh and unappealing. Internal tobacco industry documents show that tobacco companies have a long history of using flavors to reduce the harshness of their products to make them more appealing to new users, almost all of whom are under age 18.<sup>93</sup> By masking the harshness and soothing the irritation caused by tobacco smoke, flavors make it easier for beginners – primarily kids – to experiment with the product and ultimately become addicted.

Menthol has particularly appealing qualities for novice smokers. Menthol is a chemical compound that cools and numbs the throat, reducing the harshness of cigarette smoke, thereby making menthol cigarettes more appealing to youth who are initiating tobacco use.<sup>94</sup> As TPSAC noted, "Menthol cannot be considered merely a flavoring additive to tobacco. Its pharmacological actions reduce the harshness of smoke and the irritation from nicotine."<sup>95</sup> According to TPSAC's conclusions:<sup>96</sup>

- Menthol cigarettes increase the number of children who experiment with cigarettes and the number of children who become regular smokers, increasing overall youth smoking.
- Young people who initiate using menthol cigarettes are more likely to become addicted and become long-term daily smokers.

As the only flavored cigarette left on the market, it is no surprise that menthol cigarettes remain popular among youth. In fact, a study analyzing the impact of the 2009 ban on

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<sup>a</sup> TPSAC is a group of scientific experts charged with advising the Commissioner of Food and Drugs on safety, dependence, and health issues relating to tobacco. See <https://www.fda.gov/advisoryCommittees/CommitteesMeetingMaterials/tobaccoproductsScientificAdvisoryCommittee/default.htm> for more details.

characterizing flavors in cigarettes on youth tobacco use found that use of menthol cigarettes among high schoolers significantly increased after the ban.<sup>97</sup> Since the reports from FDA and TPSAC, research has continued to demonstrate the popularity of menthol cigarettes among youth and menthol's role in smoking initiation:

- Youth smokers are more likely to use menthol cigarettes than any other age group. Over half (54 percent) of youth smokers ages 12-17 use menthol cigarettes, compared to less than one-third of smokers ages 35 and older.<sup>98</sup>
- Prevalence of menthol use is even higher among African American youth: seven out of ten African-American youth smokers smoke menthol cigarettes.<sup>99</sup>
- The popularity of menthol flavored cigarettes is also evidenced by brand preference among youth. According to data from the 2015 National Survey on Drug Use and Health, one in five smokers ages 12-17 prefers Newport cigarettes, a heavily marketed menthol cigarette brand. Preference for Newport is even higher among African-American youth smokers (69.1 percent) because of targeted marketing by the tobacco industry.<sup>100</sup>
- Data from Wave 1 of the government's Population Assessment of Tobacco and Health (PATH) study found that youth menthol smokers are more likely to perceive menthol cigarettes as easier to smoke than regular cigarettes.<sup>101</sup>
- Data from Truth Initiative's Young Adult Cohort Study, a national study of 18-34 year olds, showed that 52 percent of new young adult smokers initiated with menthol cigarettes. Initiation with menthol cigarettes was higher among black smokers (93.1%) compared to white smokers (43.9%).<sup>102</sup>

### **Menthol Increases Addiction and Makes it Harder for Smokers to Quit**

While the tobacco industry initially marketed menthol cigarettes as safer and healthier cigarettes, because of their cooling properties and reduced throat irritability, this could not be further from the truth.<sup>103</sup> In fact, because menthol cigarettes are less harsh, they are associated with increased initiation and greater addiction, and FDA found that it is **"likely that menthol cigarettes pose a public health risk above that seen with nonmenthol cigarettes."**<sup>104</sup>

Both TPSAC's and FDA's own scientific analyses conclude that menthol cigarettes are associated with increased nicotine dependence and reduced success in smoking cessation.<sup>105</sup> TPSAC projected that by 2020, about 17,000 premature deaths will be attributable to menthol

cigarettes and about 2.3 million people will have started smoking because of menthol cigarettes.<sup>106</sup>

Research continues to bolster the findings of FDA and TPSAC. A 2014 randomized clinical trial of FDA-approved cessation treatments among 1,500 US adult smokers found that menthol smoking was associated with reduced likelihood of quitting, compared to non-menthol smoking. African American female smokers had the lowest quit rates of all groups in the study.<sup>107</sup> A meta-analysis of findings from nearly 150,000 smokers found that among African Americans, menthol smokers have a 12% lower odds of smoking cessation compared to non-menthol smokers.<sup>108</sup>

The difficulty that menthol smokers have in quitting continues to be reflected in national smoking prevalence and sales trends. Between 2009 and 2016, sales of non-menthol cigarettes have declined by 25.8% nationally, while sales of menthol cigarettes have declined by only 2.2%.<sup>109</sup> While smoking rates have declined overall in recent years, use of menthol cigarettes has increased significantly. Menthol smoking rates have increased among young adults and remained constant among youth and adults, while non-menthol smoking has decreased in all three age groups.<sup>110</sup> Overall, nearly 40 percent (38.8%) of smokers use menthol cigarettes.

In recent years, use of menthol cigarettes has increased among White, Asian, and Hispanic smokers. Use of menthol cigarettes has remained constant among African-American smokers, who continue to use menthol cigarettes more than any other racial/ethnic group.<sup>111</sup> Research also shows that use of menthol cigarettes has perpetuated disparities among those with mental illness. Data from the 2008 and 2009 National Survey on Drug Use and Health show that smokers with severe psychological distress were significantly more likely to use menthol cigarettes than smokers with no or mild psychological distress.<sup>112</sup>

### **Use of Menthol Cigarettes Leads to Health Disparities for African Americans**

Prevalence of menthol use is highest among African Americans - 85 percent of all African-American smokers smoke menthol cigarettes, compared to 29 percent of Whites.<sup>113</sup> The tobacco industry's "investment" in the African-American community has had a destructive impact. TPSAC's report and FDA's analysis conclude that African Americans are disproportionately burdened by the health harms of menthol cigarettes. Specifically, TPSAC concluded that the marketing and availability of menthol cigarettes increases the overall prevalence of smoking and reduces cessation among African Americans.<sup>114</sup>

- African Americans generally have higher levels of nicotine dependence as a consequence of their preference for mentholated cigarettes.<sup>115</sup> While research shows that African American smokers are highly motivated to quit smoking and are more likely than White smokers to have made a quit attempt and used counseling services in the previous year, they are less likely than White smokers to successfully quit smoking.<sup>116</sup>
- TPSAC estimated that by 2020, 4,700 excess deaths in the African-American community will be attributable to menthol cigarettes, and over 460,000 African Americans will have started smoking because of menthol cigarettes.<sup>117</sup>
- African Americans suffer the greatest burden of tobacco-related mortality of any racial or ethnic group in the United States. Each year, approximately 45,000 African Americans die from a smoking-caused illness. Unless action is taken, an estimated 1.6 million African Americans alive today, who are now under the age of 18, will become regular smokers; and about 500,000 of these will die prematurely from a tobacco-related disease.<sup>118</sup>
- Lung cancer is the second most common cancer in both African-American men and women, but it kills more African Americans than any other type of cancer.<sup>119</sup> Decreased cessation success due to the popularity of menthol cigarettes among African Americans likely contributes to this mortality disparity.<sup>120</sup>

### **The Tobacco Industry Targets Minorities and Youth with Menthol Cigarette Marketing**

The greater popularity of menthol cigarettes among African Americans, youth, and other minorities is a direct result of a decades-long marketing campaign by the tobacco industry. In fact, TPSAC concluded that menthol cigarettes are marketed disproportionately to younger smokers and African Americans.<sup>121</sup> Dating back to the 1950s, the tobacco industry has targeted these communities with marketing for menthol cigarettes through sponsorship of community and music events, targeted magazine advertising, youthful imagery, and marketing in the retail environment.

***Music and Community Event Sponsorship.*** Beginning in the 1970s, the major tobacco companies competed for the African American market share by sponsoring music and community events like Brown & Williamson's "Kool Jazz Festival," R.J. Reynolds' "Salem Summer Street Scenes," and Phillip Morris's "Club Benson & Hedges" promotional bar nights.<sup>122</sup> Kool also sponsored Latin music festivals, including the branded "Kool Latino Festival," in the 1970s and 1980s.<sup>123</sup>

**Magazine Advertising.** Expenditures for magazine advertising of mentholated cigarettes increased from 13 percent of total ad expenditures in 1998 to 76 percent in 2006.<sup>124</sup> During the two years after the Master Settlement Agreement (MSA) in November 1998, the average annual expenditures for Newport in magazines with high youth readership increased 13.2 percent (from \$5.3 to \$6.0 million).<sup>125</sup> Between 1998–2002, *Ebony*, a magazine tailored to African-American culture, was 9.8 times more likely than *People* to contain ads for menthols.<sup>126</sup> One study comparing the English and Spanish language versions of *Cosmopolitan* and *Glamour* from 1998-2002 found that 51 percent of the cigarette ads in the Spanish language versions were for menthol brands, compared to only 28 percent in the English language versions.<sup>127</sup>

**Youthful Imagery.** The tobacco companies commonly use youthful imagery in its advertising to appeal to young consumers. As a R.J. Reynolds document from 1981 noted, “The benefit of smoking which has most frequently and most successfully been exploited by brand families appears to be Social Interaction. For example, some brands, such as Newport, have focused on the younger adult ‘peer group’ aspect of social interaction.”<sup>128</sup> Newport’s “Alive with Pleasure” campaign, which continues today, portrays smokers in fun, social environments in its advertisements.<sup>129</sup> In 2004, Brown & Williamson started an ad campaign for their Kool brand cigarettes clearly aimed at youth—and African-American youth, in particular. The Kool Mixx campaign featured images of young rappers, disc jockeys and dancers on cigarette packs and in advertising. The campaign also included radio giveaways with cigarette purchases and a Hip-Hop disc jockey competition in major cities around the country. The themes, images, radio giveaways and music involved in the campaign all clearly have tremendous appeal to youth, especially African-American youth. Attorneys General from several states promptly filed motions against Brown & Williamson for violating the Master Settlement Agreement.<sup>130</sup>

**Racially Targeted Marketing.** For decades, tobacco companies have specifically targeted minority communities, particularly African Americans, with intense advertising and promotional efforts. Beginning in the 1970s, the major tobacco companies used mobile van programs, like the Newport Pleasure Van, to expand their reach in urban areas through product sampling and coupon distribution.<sup>131</sup> The tobacco companies also developed specific strategies and specially designed product displays to adapt their point-of-sale marketing to smaller retailers that were more common in urban areas. Phillip Morris implemented promotion programs and paid retailers to exhibit product displays and grow their inventory. Brown & Williamson launched its Kool Inner City Point of Purchase Program, later the Kool Inner City Family Program, with the explicit goal, “to reach the core of Kool’s franchise (young, black, relatively low income and education),”<sup>132</sup> with both retailer and consumer promotions.<sup>133</sup> Today, menthol cigarettes continue to be heavily advertised, widely available, and priced cheaper in certain African-

American communities, making them more appealing, particularly to price-sensitive youth. A wealth of research indicates that African-American neighborhoods have a disproportionate number of tobacco retailers, pervasive tobacco marketing, and in particular, more marketing of menthol products.<sup>134</sup>

- Like many minority and low-income neighborhoods, African-American neighborhoods tend to have more tobacco retailers. Nationwide, census tracts with a greater proportion of African American residents have higher tobacco retailer density.<sup>135</sup>
- A 2011 study of cigarette prices in retail stores across the U.S. found that Newport cigarettes are significantly less expensive in neighborhoods with higher proportions of African Americans.<sup>136</sup>
- The 2011 California Tobacco Advertising Survey reports that there were significantly more menthol advertisements at stores in neighborhoods with a higher proportion of African-American residents and in low-income neighborhoods.<sup>137</sup>
- Another 2011 California study found that as the proportion of African-American high school students in a neighborhood rose, the proportion of menthol advertising increased, the odds of a Newport promotion were higher, and the cost of Newport cigarettes was lower.<sup>138</sup>
- A 2013 study of tobacco retail outlets in St. Louis found more tobacco advertising, including more menthol advertising, in areas with a greater proportion of African-American residents.<sup>139</sup> Another 2013 study found similar patterns in Ramsey County, Minnesota.<sup>140</sup>

### **State and Local Action to Restrict the Sale of Menthol Tobacco Products**

States and localities can implement additional sales restrictions on menthol cigarettes and flavored non-cigarette tobacco products. Despite inevitable opposition from tobacco companies, states and localities have clear authority to restrict the sale of flavored tobacco products (or any tobacco product) to reduce tobacco use and its harms to its citizens.

In November 2019, Massachusetts became the first state to restrict the sale of all flavored tobacco products, including menthol cigarettes. The policy goes into effect June 1, 2020. In addition, over 250 localities around the country restrict sales of flavored tobacco products, and at least 80 of these include menthol cigarettes in their sales restriction.<sup>141</sup> For example:

- In 2017, the San Francisco Board of Supervisors unanimously passed an ordinance to prohibit the sale of all flavored tobacco products, including menthol cigarettes and e-cigarettes.<sup>142</sup> This law, originally slated to go into effect on April 1, 2018, is the strongest flavor restriction in the US. However, R.J. Reynolds, manufacturer of the top-selling menthol brand, quickly responded by gathering signatures for a referendum petition, allowing voters to decide on the June 2018 ballot whether the restriction should be implemented.<sup>143</sup> San Francisco residents overwhelmingly voted (68.4% to 31.6%)<sup>144</sup> to implement the flavored tobacco sales restriction, despite the industry spending nearly \$12 million to try to defeat the initiative.<sup>145</sup> Many California localities, including Sacramento and Los Angeles County, have followed San Francisco's lead and passed comprehensive sales restrictions.
- Oakland, CA's ordinance, effective July 1, 2018, restricts the sale of all flavored tobacco products, including menthol cigarettes and e-cigarettes, except in adult-only tobacco retailers.<sup>146</sup>
- Minneapolis and St. Paul, MN originally passed restrictions that restricted the sale of all flavored tobacco products, excluding menthol cigarettes, in all stores except adult-only tobacco retailers (effective 1/1/2016 and 4/15/2016, respectively). However, in 2017, both cities voted to expand these laws to also restrict the sale of menthol flavored tobacco products in all stores except adult-only tobacco retailers and liquor stores (effective 8/1/2018 and 11/1/2018, respectively).<sup>147</sup>

The Canadian government banned menthol cigarettes in October 2017, although most provinces had banned menthol cigarettes prior to the nationwide law. Preliminary evaluation results from Ontario, which banned menthol cigarettes on January 1, 2017, suggest that menthol smokers had higher rates of quitting and quit attempts following implementation of the law than non-menthol smokers.<sup>148</sup> These results are promising, but it is important to note that menthol cigarettes comprised a much smaller proportion of the Canadian cigarette marketplace (~5%) than the US marketplace (36%), and the demographics of menthol smokers are very different between the two countries.

Massachusetts became the first state in the nation to ban the sales of all flavored tobacco products, including menthol cigarettes. Connecticut should join its neighbor to the north and become the second.

## **Eliminating Tobacco Product Sales in Pharmacies**

There are hundreds of thousands of tobacco retailers in the United States, including nearly 700 in Connecticut.<sup>149</sup> The widespread availability of tobacco products in the retail environment sends a terrible message to kids that tobacco use is normal, acceptable and appealing. Tobacco retailer density and exposure to tobacco products and marketing in the retail environment encourages youth experimentation with and initiation of tobacco use.<sup>150</sup> Prohibiting tobacco sales in pharmacies in Connecticut will help to reduce tobacco retailer density as well as reduce the availability, appeal, and social acceptability of tobacco products.<sup>151</sup>

Exposure to tobacco products in the retail environment also prompts impulse purchases and undermines quit attempts.<sup>152</sup> Pharmacy patrons should not be exposed to tobacco products and advertising in the same place where they purchase cessation aids or medication for serious tobacco-related illnesses. Selling tobacco in pharmacies sends a mixed message to consumers about the health effects of tobacco use tobacco and compromises pharmacists' commitment to protecting their patients' health. This is especially true as pharmacies continue to add health care clinics as part of their model.<sup>153</sup> Moreover, a national study found that cigarettes are priced cheaper in pharmacies than most other retailers,<sup>154</sup> which may further increase the appeal of tobacco products in pharmacies. Prohibiting the sale of tobacco products in pharmacies will ensure that these healthcare environments are supportive of tobacco cessation.<sup>155</sup>

Prohibiting the sale of tobacco products in pharmacies is a widely supported tobacco control strategy, with support from two-thirds of US adults.<sup>156</sup> This policy is endorsed by the American Pharmacists Association,<sup>157</sup> the National Community Pharmacists Association,<sup>158</sup> and the American Academy of Pediatrics,<sup>159</sup> based on the recognition that the sale of tobacco in pharmacies elicits a conflict of interest for health care providers.<sup>160</sup> In September 2014, CVS Health ceased tobacco sales, affecting more than 7,800 retailers in 47 states.<sup>161</sup> At least 151 municipalities in Massachusetts (covering over 67 percent of residents),<sup>162</sup> San Francisco, CA, New York City and Rockland County, NY have already banned the sale of tobacco in pharmacies and other healthcare institutions.<sup>163</sup> In 2018, the state of Massachusetts became the first state in the nation to ban the sale of tobacco products in healthcare facilities. This widespread support reflects the overwhelming recognition that selling a product that is the leading preventable cause of premature death is incompatible with a mission of health promotion. Ending tobacco sales in pharmacies will send a clear message to consumers: a pharmacy is no place for tobacco. Such action would reduce the availability and marketing of tobacco products, accelerate progress in reducing tobacco use, and ultimately help end the tobacco epidemic for good.



## Conclusion

We are facing an epidemic in youth e-cigarette use. Parents, school officials, and health care providers from across the country have recognized that a new generation of young people are becoming addicted to nicotine with potentially devastating long term consequences.

Whereas the potential public health benefit of flavored e-cigarettes is entirely speculative, the crisis of youth usage is real and growing. The scientific evidence leaves no doubt that flavored e-cigarettes, just like flavored cigarettes and other tobacco products, increase the number of people who initiate tobacco use and become addicted, particularly kids. In addition, tobacco products should have no place in pharmacies and other health care facilities that are dedicated to promoting the health of customers and the state's population at large. We strongly encourage the Connecticut Legislature to prohibit the sale of flavored e-cigarettes and the sale of tobacco products in pharmacies as proposed in HB 5020 and SB 244 to curtail the youth e-cigarette epidemic and restrict the availability of all tobacco products. We also urge the legislature to enact HB 76 to ensure that no flavored tobacco product continues to addict our youth, especially those in racially targeted communities. Connecticut's kids deserve every protection available from the insidious products and predatory marketing of the tobacco industry.

Thank you for the opportunity to submit comments on this important issue.

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